

UNITED STEES DEPARTMENT OF COMMERCE

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| APPLICATION NUMBER | FILING DATE | FIRST NAMED APPLICANT | АТТО | DRNEY DOCKET NO. |
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| 08/746,635 | 11/13/96 | Murthy | V | 96700/341 |
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| | | | G | Gabel |
| | | | ART UNIT | PAPER NUMBER |
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| | INTER | RVIEW SUMMARY | DATE MAILED: | 9/3/99 |
| participants (applicant, applicant's | representative. PTO persor | inel): | | |
| Craig Arnol | | | | |
| | Gabel (PT | (3) | | |
| Class | 00 | (4) | - | |
| te of Interview 8/30/ | 99 | | | |
| e: Telephonic 🗆 Personal (c | opy is given to applica | nt 🗆 applicant's representative) | • | |
| nibit shown or demonstration condu | A = | | | |
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| reement 🗆 was reached. 📈 was | | | | |
| nim(s) discussed: | ecord | | | |
| entification of prior art discussed: | of recon | d | | S |
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| escription of the general nature of wh | | | Con | Hormed with |
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| raig Arnold Shat | • | _ | | |
| lem 16) should b | e checked ms | head of Hem 1(1 |), 10 r | esterale, the |
| roposed amendmen | | | | will not be |
| where d and the | sinal rejection | o stands becau | 100 1Cb |) else |
| new issues that | would read | ire further con | | D and loc class |
| fuller description, if necessary, and | a copy of the amendments | , if available, which the examiner | agreed would rende | er the claims allowable |
| st be attached. Also, where no copached.) | | _ | | |
| ☐ It is not necessary for applicant | | For the record, independent of the substance of the interview | | raffer was intro per No. 21 amend |
| less the paragraph above has been | | | • | <u>-</u> |
| NOT WAIVED AND MUST INCLUD ion has are ready been filed, APPLIBSTANCE OF THE INTERVIEW. | E THE SUBSTANCE OF T | HE INTERVIEW. (See MPEP Sec | tion 713.04). If a re | sponse to the last Office |
| ☐ Since the Examiner's interview s | summary above (including a | any attachments) reflects a comple | ete response to ea | ch of the objections, |
| rejections and requirements that | may be present in the last | Office action, and since the claim Office action. Applicant is not reli | s are now allowable | e, this completed form |

Examiner Note: You must sign this form unless it is an attachment to another form.

the interview unless box 1 above is also checked.

FORM PTOL-413 (REV.1-96)

Dulere B. Babel 8/38/99



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